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| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10699425 | <b>Applicant(s)/Patent Under Reexamination</b><br>ELLIS ET AL. |
|   | <b>Examiner</b><br>Arti Singh-Pandey       | <b>Art Unit</b><br>1786  |

| ORIGINAL           |                                   |          |  |  |  | INTERNATIONAL CLASSIFICATION |   |   |   |                      |             |  |  |  |  |  |  |  |
|--------------------|-----------------------------------|----------|--|--|--|------------------------------|---|---|---|----------------------|-------------|--|--|--|--|--|--|--|
| CLASS              |                                   | SUBCLASS |  |  |  | CLAIMED                      |   |   |   |                      | NON-CLAIMED |  |  |  |  |  |  |  |
| 442                |                                   | 123      |  |  |  | B                            | 3 | 2 | B | 27 / 12 (2008.01.01) |             |  |  |  |  |  |  |  |
| CROSS REFERENCE(S) |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
| 442                | 124                               | 35       |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |
|                    |                                   |          |  |  |  |                              |   |   |   |                      |             |  |  |  |  |  |  |  |

| <input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|--|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final  | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
|  | 1        | 4     | 17       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 2        | 5     | 18       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 3        | 6     | 19       |       |          |       |          |       |          |       |          |       |          |       |          |
| 1  | 4        | 7     | 20       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 5        | 8     | 21       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 6        | 9     | 22       |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 7        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 8        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 9        |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 10       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 11       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 12       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 13       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|  | 14       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 2  | 15       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 3  | 16       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

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|---|--|------------------------------|-------------------|
| NONE  |  | <b>Total Claims Allowed:</b> |                   |
|   |  | 9                            |                   |
| (Assistant Examiner)                                  |  | (Date)                       |                   |
| /Arti Singh-Pandey/<br>Primary Examiner Art Unit 1786 |  | 11/1/2010                    |                   |
| (Primary Examiner)                                    |  | (Date)                       |                   |
|   |  | O.G. Print Claim(s)          | O.G. Print Figure |
|   |  | 1                            | 1                 |